

16:19:20

OCA PAD INITIATION - PROJECT HEADER INFORMATION

05/09/90

Active

Project #: M-50-601 Cost share #: Rev #: 0
Center # : 10/24-6-R6503-3A0 Center shr #: OCA file #:
Contract#: 5 R01 AA07250-03 Mod #: Work type : RES
Prime # : Document : GRANT
Contract entity: GTRC

Subprojects ? : N
Main project #:

Project unit: MGMT COLL Unit code: 02.010.166
Project director(s):
BLUM T C MGMT COLL (404)894-4924

Sponsor/division names: DHHS/PHS/ADAMHA / ALCOHOL, DRUG ABUSE & MENTAL
Sponsor/division codes: 108 / 004

Award period: 900501 to 910430 (performance) 910731 (reports)

Sponsor amount	New this change	Total to date
Contract value	277,074.00	277,074.00
Funded	277,074.00	277,074.00
Cost sharing amount		0.00

Does subcontracting plan apply ? : N

Title: STRUCTURE AND CONTENT OF EMPLOYEE ALCOHOLISM PROGRAMS

PROJECT ADMINISTRATION DATA

OCA contact: Kathleen R. Ehlinger 894-4820

Sponsor technical contact

Sponsor issuing office

DONALD F. GODWIN, PROJECT OFFICER
(301)443-1677

EDWARD B. ELLIS, GRANTS MGMT SPEC
(301)443-4703
GRANTS MANAGEMENT BRANCH, NIAAA
5600 FISHERS LANE, RM. 16-8
ROCKVILLE, MD. 20857

PREVENTION RESEARCH BRANCH
DIV OF CLINICAL & PREVENTION RES.
DHHS/PHS/NIAAA
5600 FISHERS LANE
ROCKVILLE, MD. 20857

Security class (U,C,S,TS) : U
Defense priority rating : N/A
Equipment title vests with: Sponsor

ONR resident rep. is ACO (Y/N): N
NIAAA supplemental sheet
GIT X

Administrative comments -
INITIATION OF YEAR OF 3 OF 5 YEAR PROJECT.



GEORGIA INSTITUTE OF TECHNOLOGY
OFFICE OF CONTRACT ADMINISTRATION

NOTICE OF PROJECT CLOSEOUT

Closeout Notice Date 05/15/91

Project No. M-22-601_____ Center No. 10/24-6-R6503-3A0_

Project Director BLUM T C_____ School/Lab SCH MGMT_____

Sponsor DHHS/PHS/ADAMHA/ALCOHOL, DRUG ABUSE & MENTAL_____

Contract/Grant No. 5 R01 AA07250-03_____ Contract Entity GTRC

Prime Contract No. _____

Title STRUCTURE AND CONTENT OF EMPLOYEE ALCOHOLISM PROGRAMS_____

Effective Completion Date 910430 (Performance) 910731 (Reports)

Closeout Actions Required:	Y/N	Date Submitted
Final Invoice or Copy of Final Invoice	N	_____
Final Report of Inventions and/or Subcontracts	N	_____
Government Property Inventory & Related Certificate	N	_____
Classified Material Certificate	N	_____
Release and Assignment	N	_____
Other _____	N	_____

CommentsCONTINUED BY M-22-605; NO FINAL REPORTING REQUIRED._____

Subproject Under Main Project No. _____

Continues Project No. _____

Distribution Required:

Project Director	Y
Administrative Network Representative	Y
GTRI Accounting/Grants and Contracts	Y
Procurement/Supply Services	Y
Research Property Management	Y
Research Security Services	N
Reports Coordinator (OCA)	Y
GTRC	Y
Project File	Y
Other _____	N
_____	N

SECTION IV PROGRESS REPORT SUMMARY		GRANT NUMBER	
		5 R01 AA07250-03	
PRINCIPAL INVESTIGATOR OR PROGRAM DIRECTOR		PERIOD COVERED BY THIS REPORT	
Terry C. Blum		FROM	THROUGH
APPLICANT ORGANIZATION			
Georgia Tech Research Corp		May 1, 1990	April 30, 1990
TITLE OF PROJECT (Repeat title shown in item 1 on first page)			
STRUCTURE AND CONTENT OF EMPLOYEE ALCOHOLISM PROGRAMS			
(SEE INSTRUCTIONS)			

There are no anticipated changes from the original proposal in objectives, specific aims, methods for achieving the project goals, nor in human subject protocols. Also there are no changes other than those indicated in our previous continuation proposal, the lag of which will continue through the completion of the project. As indicated in the continuation application that was submitted last year, there is a change in the time frame for accomplishing the project. Essentially, the project will take a fifth year to complete rather than the 4 years for which the grant was awarded. This fifth year will only require the carry over of the unexpended funds that have been awarded and will enable the full 24 month follow up of the cases that have entered the data collection system as new EAP cases. The extra time is necessary because data collection was delayed due to the implementation of the federal regulations regarding drug free workplace policies. The delay assured the integrity of the data by eliminating potential biases related to worksite policy and practice changes that might have had a temporary or permanent impact on the EAP functions and the utilization patterns of the EAPs by individual clients.

The focus of the REFERRAL study is on how individuals with alcohol problems get to an EAP, and what happens to them after their EAP contact. The individual cases are tracked for up to 2 years after initial EAP contact. Standardized tests are used in the intake protocols: the CAGE screen, the ADS to measure alcohol problem severity, and the Beck's depression inventory. The instruments that are used at baseline, one completed by the EAP administrator and a second one completed by the EAP client are submitted in the Appendix. The follow up procedures for the first and second follow ups are in place and running smoothly. The two instruments used at the first follow up, one completed by the EAP administrator and the second completed by the EAP clients, and the instrument used at the second follow up are also included in the Appendix.

We have coded and entered into the computer almost 5,000 initial EAP cases. The demographic distribution of clients is very interesting and indicates substantial numbers of women and

minority group members in the EAP caseloads. The median age of the EAP clients is 37, 55% are women, 70% are white, 24% are black, 5% are hispanic, 2% are Asian or other categories. While the data has not been systematically compared with the demographics of the worksites in the study, initial examinations suggest that blacks and women are overrepresented in EAP utilization. It remains a research question as to how they are represented in problem assessment categories, as well as recovery and referral patterns. Thirty-six percent of the EAP clients are at or above the first line supervisory level in their organization's hierarchy, 30% are clerical workers and 32% are blue collar workers. More detailed job categories and job tasks are included in the data sets.

In terms of alcohol problems, 27% of the individual employee EAP clients answered yes to at least 1 of the CAGE items. Eight percent of the sample answered yes to one item, 9% to two items, 6% to three items and 5% answered yes to all four items.

With reference to the depression screen, 32% of all clients score in the category of none to minimal depression, with 19% scoring in the mild depression category, 34% in the moderate category (which is a category that includes lots of other psychopathology), and 16% in the severe category.

In terms of the first follow up, for which we have presently followed almost 400 cases, we have found that 89% of the EAP clients are still employed 12 months after initial EAP contact. Two-thirds of those who are no longer employed with the company were involuntarily terminated, 27% quit, 3% retired, and 3% left the company as part of a larger layoff due to restructuring. About two thirds of those with drinking problems at intake are reported to be abstaining 12 months later. Analysis of the intake and follow up status of the clients by demographics, work characteristics, EAP and other worksite characteristics is planned. Also planned are between organization analyses to assess whether there are EAP program, insurance availability, or alcohol policy and practice differences that impact the patterns founds within a given worksite.

PRESENTATIONS AND MANUSCRIPTS

"Managerial and supervisory propensity to use an employee assistance program," presented at the 19th Annual Meetings of the Employee Assistance Program Association, October, 1990.

"Lifecourse and Alcohol Problems in the Worksite," presented at the conference on Research on Workplace, Alcohol Problems and the Lifecourse, Jasper, Alberta, October, 1990.

"Nature of Referrals to EAPs: Preliminary Results," presented at the 19th Annual Meetings of the Employee Assistance Program Association, October, 1990.

"Workplace Influences on Attitudes about Alcoholism," under review.

"Alcohol Consumption and Work Performance," under review.

"Inclusive and Exclusive Human Resource Management Strategies: EAPs and Drug Screening," presented at the Annual Meetings of the American Management Association, August, 1990.

"Employee Assistance Programs: Utilization and Referral Data, Performance Management and Prevention Concepts," T. C. Blum and N. Bennett, in ALCOHOL PROBLEM INTERVENTION IN THE WORKPLACE: EMPLOYEE ASSISTANCE PROGRAMS AND STRATEGIC ALTERNATIVES, Westport, Ct: Quorum Press, 1990.

"The Medicalized Conception of Alcohol Problems: Social Sources and Consequences of Murkiness and Confusion," P. M. Roman and T. C. Blum, in SOCIETY, CULTURE AND DRINKING PATTERNS REVISITED, H. R. White and D. Pittman (eds).

"Synergism in the Worksite Adoption of Employee Assistance Programs and Health Promotion Activities," T. C. Blum, P. M. Roman and L. Patrick, JOURNAL OF OCCUPATIONAL MEDICINE, 32 (5): 461-67 (May, 1990).

R01 AA07250-03

"Presence and Integration of Drug Abuse Intervention in Human Resource Management," in NIDA Monograph, DRUGS IN THE WORKPLACE: RESEARCH AND EVALUATION DATA, 1990.